

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741471

FILED
Mar 25, 2009
Secretary of State

Entity Name: POWELL AND YANSON BUILDING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

550 FIFTH AVENUE SOUTH
NAPLES, FL 339406614

New Principal Place of Business:

550 FIFTH AVENUE SOUTH
NAPLES, FL 34102

Current Mailing Address:

% COLONIAL SQUARE PROPERTY
P.O. BOX 10608
NAPLES, FL 34101

New Mailing Address:

C/O COLONIAL SQUARE REALTY, INC.
P.O. BOX 10608
NAPLES, FL 34101

FEI Number: 59-1826920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWERS, JILL FISHER ESQ
1188 MANDALAY POINT
CLEARWATER BEACH, FL 33767 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: YANSON, OSCAR F.
Address: 20 MOORINGS PARK D. APT E-301
City-St-Zip: NAPLES, FL 34105

Title: STD () Delete
Name: COPE, RICHARD W
Address: 1188 MANDALAY POINT
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: D () Delete
Name: OLSON, CLIFFORD D
Address: 1164 GOODLETTE RD. N.
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: YANSON, OSCAR F
Address: 20 MOORINGS PARK D. APT E-301
City-St-Zip: NAPLES, FL 34105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: OLSON, CLIFFORD D
Address: 1048 GOODLETTE ROAD, SUITE 201
City-St-Zip: NAPLES, FL 34102

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLIFFORD OLSON

D

03/25/2009

Electronic Signature of Signing Officer or Director

_____ Date